Express Mail Number: EV 283609203 US Docket Number: 29171.00

PTO/SB/01A (06-03) Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	Intravascular Infusion Site Anti-Tamper Guard Having Means For Site Inspection		
As the below named inventor(s), I/we declare that:			
This declaration	n is directed to:		
	The attached application, or		
	Application No fi		
	as amended on	(if applicable);	
I/we believe that which a patent is	at I/we am/are the original and first inventor(s) of the sis sought;	subject matter which is claimed and for	
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;			
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application.			
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.			
FULL NAME OF	OF INVENTOR(S)		
Inventor one:	Rosa Lee ELDRIDGE		
Signature:	Konsteeldurge Citizen of:	USA	
Inventor two:	David M. JONES		
Signature:	Citizen of:	USA	
Inventor three:			
Signature:	Citizen of:		
Inventor four:			
Signature:	Citizen of:		
☐ Additional inven	entors are being named onadditional form(s) attached hereto.	

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed appliction form to the USPTO. Time will vary depending upon the individual case. Any comments on the arrount of tirne you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Express Mail Number: EV 283609203 US Docket Number: 29171.00

PTO/SB/81 (05-03) Approved for use through 11/30/2005, OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

Application Number

Filing Date

ELDRIDGE, et al. First Named Inventor POWER OF ATTORNEY OR Title Intravascular Infusion Site Anti-Tamper .. AUTHORIZATION OF AGENT Art Unit **Examiner Name** 29171.00 **Attorney Docket Number** I hereby appoint: Place Customer Practitioners at Customer Number 22465 Number Bar Code Label here Practitioner(s) named below: Registration Number Name as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. Place Customer Number Bar Code **Practitioners at Customer Number** Label here Firm or Individual Name Address Address Zip City State Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTOISBI96). SIGNATURE of Applicant or Assignee of Record Alba Innovations, Inc., Rosa Lee Eldridge, Vice President and CFO Name Signature 276-445-4982 Telephone NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

forms are submitted.

Express Mail Number: EV 283609203 US Docket Number: 29171.00

PTO/SB/96 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMI	ENT UNDER 37 CFR 3.73(b)
Applicant/Patent Owner: Alba Innovations, In	nc.
Application No./Patent No.:	Filed/issue Date:
Entitled: Intravascular Infusion Site Anti-Tam	nper Guard Having Means For Site Inspection
Alba Innovations, Inc.	corporation of Tennessee
(Name of Assignee)	(Type of Assignee, e.g. corporation, partnership, university, government agency, etc.)
states that it is:	
1. \(\overline{\	nd interest: or
2. □ an assignee of less than the entire right	
The extent (by, percentage) of its owner in the patent application/patent identified abo	ership interest is%
	the patent application/patent identified above. The assignment ent and Trademark Office at Reel, Frame, or for
OR	
B.[] A chain of title from the inventor(s), of tassignee as shown below:	the patent application/patent identified above, to the current
1. From:	To:
	he United States Patent and Trademark Office at, or for which a copy thereof is attached.
	• •
2. From: The document was recorded in the	To: ne United States Patent and Trademark Office at
Reel, Frame	, or for which a copy thereof is attached.
3. From:	To:
The document was recorded in the	ne United States Patent and Trademark Office at, or for which a copy thereof is attached.
[] Additional documents in the chair	n of title are listed on a supplemental sheet.
	assignment document or a true copy of the original document) in accordance with 37 CFR Part 3, if the assignment is to be
The undersigned (whose title is supplied below	v) is authorized to act on behalf of the assignee.
2/18/03	Rosa Lee Eldridge
Date	Typed or printed name
276-445-4982 Tolophon number	Signature Signature
Telephone number	Vice President and CFO
	Title

This collection of information is required by 37 CIFIR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CIFIR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450.

Express Mail Number: EV 283609203 US

Docket Number: 29171.00

ASSIGNMENT

I, the below-identified Inventor, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to

Alba Innovations, Inc., a corporation of Tennessee, domiciled in Knox, TN

(hereinafter "Assignee"), its successors, assigns, and legal representatives the entire right, title and interest throughout the world in and to all subject matter invented by me and disclosed in the application for a Letters Patent in the United States executed by me on the date hereinafter indicated entitled:

Intravascular Infusion Site Anti-Tamper Guard Having Means For Site Inspection

and in and to all patent and all foreign, convention and treaty rights of all kinds, in all countries throughout the world, for all such subject matter or improvements therein. I agree to sign all papers necessary to secure all said patent rights, and request issuance of all said patents to Assignee in accordance with this assignment.

7-18-03	Rosa Lee Eldube
Dat	Inventor Rosa Lee ELDRIDGE
	RR 1, Box 358
	Rose Hill, VA 24281
	Lee County, VA

IN THE COUNTY OF Knox) ss.: STATE OF Tennessee)
I hereby certify that before me personally appeared Rosa Lee ELDRIDGE, personally known by me, who then and there was duly sworn by me, and under oath acknowledged that the foregoing instrument was duly signed, sealed and delivered by Rosa Lee ELDRIDGE on the date appearing at the foot thereof, all of which took place within my jurisdiction.
Nony Jean Sold July 18 , 2003 NOTARY PUBLIC My Commision Expires: April 1 , 2006

Express Mail Number: EV 283609203 US

Docket Number: 29171.00

ASSIGNMENT

I, the below-identified Inventor, for good and valuable consideration, receipt of which is hereby acknowledged, have assigned and do hereby assign to

Alba Innovations, Inc., a corporation of Tennessee, domiciled in Knox, TN

(hereinafter "Assignee"), its successors, assigns, and legal representatives the entire right, title and interest throughout the world in and to all subject matter invented by me and disclosed in the application for a Letters Patent in the United States executed by me on the date hereinafter indicated entitled:

Intravascular Infusion Site Anti-Tamper Guard Having Means For Site Inspection

and in and to all patent and all foreign, convention and treaty rights of all kinds, in all countries throughout the world, for all such subject matter or improvements therein. I agree to sign all papers necessary to secure all said patent rights, and request issuance of all said patents to Assignee in accordance with this assignment.

7/18/03	- And Maria
Dat	Inventor David M. JONES
	5833 Wooded Acres Drive
	Knoxville, TN 37921
	Knox County, TN

IN THE COUNTY OF Knox		
STATE OF TENNESSEE) ss.:		
who then and there was duly sworn by me, and under oath ac signed, sealed and delivered by David M. JONES	pavid M. JONES , personally known by me, knowledged that the foregoing instrument was duly on the date appearing at the foot thereof, all of	
which took place within my jurisdiction.		
Nancy Jan Small	Inly 18 , 2003	,
NOTARY PUBLIC My Commission Expires:	April 1 , 2006	•

Express Mail Number: EV 283609203 US Docket Number: 29171.00

PTO/SB/81 (05-03) Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

Application Number

,	Filing Date		
	First Named Inventor	ELDRIDGE, et al.	
POWER OF ATTORNEY OR	Title	Intravascular Infusion Site Anti-Tamper	
AUTHORIZATION OF AGENT	Art Unit		
	Examiner Name		
	Attorney Docket Number	29171.00	
I hereby appoint:			
Practitioners at Customer Number 22465 Place Customer Number Bar Code Label here			
Practitioner(s) named below:			
Name	Re	egistration Number	
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.			
Please change the correspondence address for the The above-mentioned Customer Number.	" "		
OR		Place Customer	
Practitioners at Customer Number		Number Bar Code	
OR		Label here	
Firm <i>or</i> Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		
I am the: Applicant/Inventor.			
Z / ppilodite in tolice.			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTOISBI96).			
SIGNATURE of Applica	int or Assignee of Recor	-4	
Name Rosa Lee ELDRIDGE	ille of nooignoo contract	<u> </u>	
Signature Posa Lee Eld	0.		
Date 01803	Telephone	276-445-4982	
NOTE: Signatures of all the inventors or assignees of record of the	entire interest or their repres	sentative(s) are required. Submit multiple	
forms if more than one signature is required, see below*.			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Express Mail Number: EV 283609203 US Docket Number: 29171.00

PTO/SB/81 (05-03) Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

Application Number

Filing Date

	First Named Inventor	ELDRIDGE, et al.
POWER OF ATTORNEY OR	Title	Intravascular Infusion Site Anti-Tamper
AUTHORIZATION OF AGENT	Art Unit	
	Examiner Name	
	Attorney Docket Number	r 29171.00
I hereby appoint:		
Practitioners at Customer Number	22465	Place Customer Number Bar Code Label here
Practitioner(s) named below:		
Name		eqistration Number
as my/our attorney(s) or agent(s) to prosecute th	ne application identified a	above, and to transact all
business in the United States Patent and Traden		
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Number Bar Code Label here		
OR	==	
Firm or Individual Name		
Address		
Address		
City	State	Zip
Country		
Telephone	Fax	
I am the:		
Applicant/Inventor.		
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTOISBI96).		
SIGNATURE of Appli	cant or Assignee of Reco	ord
Name David M. JONES		
Signature And American		
Date 7/18/03	Telephone	(865) 357-4982
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple		
forms if more than one signature is required, see below*. *Total of forms are submitted.		
— . Juli J Joins are submitted.		· · · · · · · · · · · · · · · · · · ·

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: ELDRIDGE, Rosa L., et al.)

Filed: Herewith)

For: Intravascular Infusion)

Site Anti-Tamper Guard)

Having Means For)

Site Inspection)

DECLARATION OF ROSA LEE ELDRIDGE IN SUPPORT OF PETITION TO MAKE SPECIAL

Honorable Commissioner of Patents Washington, D.C. 20231

Dear Sir:

I, Rosa Lee Eldridge, a citizen of the United States of America, residing at RR1, Box 358, Rose Hill, Virginia, 24281, submit the enclosed statement explaining how the subject invention contributes to the treatment of HIV/AIDS or cancer. I request that my above-referenced patent application be accorded special examination status based upon the subject invention providing for improved treatment of HIV/AIDS or cancer, especially for the very young and aged patients that I provide care for in my practice in the field of nursing.

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Dated: 7/18/03

Enclosure: Statement of 2 pgs.

Rosa L. Eldridge, L.P.N.